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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

Title of  
Invention **AN ILLUMINATION SYSTEM FOR MICROLITHOGRAPHY**

As the below named inventor(s), I/we declare that  
This declaration is directed to:

- ☐ The attached application, or  
☒ Application No. 10/563,175, filed on December 30, 2005,  
☐ as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

**WARNING:**

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**

Inventor one: WOLFGANG SINGER

Signature: \_\_\_\_\_

Citizen of: DE

Inventor two: JOACHIM WIETZORREK

Signature: Joachim Wietzorrek

Citizen of: DE

☒ Additional inventors or a legal representative are being named 1 additional form(s) attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Page 2 of 2

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

JOACHIM

HAINZ

Inventor's  
Signature

Residence: City

State

Country

Date

Post Office Address

Citizenship

DE

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

GABRIELE

WEIRAUCH

Inventor's  
Signature

Residence: City

State

Country

Date

Post Office Address

Citizenship

DE

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

Family Name or Surname

MANFRED

MAUL

Inventor's  
Signature

Residence: City

State

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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
JOACHIM				HAINZ			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	DE
Post Office Address							
Post Office Address							
City		State	ZIP		Country		
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
GABRIELE				WEIRAUCH			
Inventor's Signature		<i>Gabriele Weirauch</i>		Date		6/26/06	
Residence: City		Dresden	State	Germany	Country		Citizenship
Post Office Address		Schönbrunnstr. 8				DE	
Post Office Address							
City			State	ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
MANFRED				MAUL			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	DE
Post Office Address							
Post Office Address							
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**FULL NAME OF INVENTOR(S)**

Inventor one: **WOLFGANG SINGER**

Signature: W. Singer

Citizen of: **DE**

Inventor two: **JOACHIM WIEPZORREK**

Signature: \_\_\_\_\_

Citizen of: **DE**

☒ Additional inventors or a legal representative are being named 1 additional form(s) attached hereto.

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>2</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
JOACHIM				HAINZ			
Inventor's Signature	<i>Joachim Hainz</i>					Date	April 26, 2006
Residence: City		State		Country		Citizenship	DE
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
GABRIELE				WEIRAUCH			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	DE
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
MANFRED				MAUL			
Inventor's Signature	<i>Manfred Maul</i>					Date	May 09, 2006
Residence: City		State		Country		Citizenship	DE
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/563,175
Filing Date	DECEMBER 30, 2005
First Named Inventor	WOLFGANG SINGER
Title	An Illumination System for Microlithogr
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	637.0063USU

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	OHLANDT, GREELEY, RUGGIERO & PERLE, L.L.P.				
Address	ONE LANDMARK SQUARE, 10TH FLOOR				
City	STAMFORD	State	CT	Zip	06901
Country	UNITED STATES				
Telephone	203-327-4500	Email	INFO@OGRP.COM		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	
Name	WOLFGANG SINGER	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ \*Total of 5 forms are submitted.

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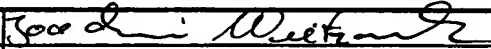
<input checked="" type="checkbox"/> Firm or Individual Name	OHLANDT, GREELEY, RUGGIERO & PERLE, L.L.P.			
Address	ONE LANDMARK SQUARE, 10TH FLOOR			
City	STAMFORD	State	CT	Zip 06901
Country	UNITED STATES			
Telephone	203-327-4500	Email	INFO@OGRP.COM	

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## **SIGNATURE of Applicant or Assignee of Record**

Signature		Date	
Name	JOACHIM WIETZORREK	Telephone	
Title and Company			

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Signature		Date	
Name	JOACHIM HAINZ	Telephone	
Title and Company			

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<input checked="" type="checkbox"/> Firm or Individual Name	OHLANDT, GREELEY, RUGGIERO & PERLE, L.L.P.		
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Signature		Date	
Name	GABRIELE WEIRAUCH	Telephone	
Title and Company			

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Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	OHLANDT, GREELEY, RUGGIERO & PERLE, L.L.P.				
Address	ONE LANDMARK SQUARE, 10TH FLOOR				
City	STAMFORD	State	CT	Zip	06901
Country	UNITED STATES				
Telephone	203-327-4500	Email	INFO@OGRP.COM		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	
Name	MANFRED MAUL	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ \*Total of 5 forms are submitted.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/563,175
Filing Date	DECEMBER 30, 2005
First Named Inventor	WOLFGANG SINGER
Title	An Illumination System for Microlithogr
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	637.0063USU

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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Signature	<i>W. Singer</i>	Date	12/03/2006
Name	WOLFGANG SINGER	Telephone	
Title and Company			

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Doc Code:

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Signature		Date	
Name	<b>JOACHIM WIETZORREK</b>	Telephone	
Title and Company			

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Filing Date	DECEMBER 30, 2005
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Examiner Name	Not Yet Assigned
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## **SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Joachim Hainz</i>	Date	April 28, 2006
Name	JOACHIM HAINZ	Telephone	
Title and Company			

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Signature		Date	
Name	<b>GABRIELE WEIRAUCH</b>	Telephone	
Title and Company			

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Signature		Date	May 08, 2006
Name	MANFRED MAUL	Telephone	
Title and Company			

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Art Unit	Not Yet Assigned
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Signature		Date	
Name	WOLFGANG SINGER	Telephone	
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Signature	Date
Name	JOACHIM WIETZORREK Telephone
Title and Company	

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Signature		Date	
Name	JOACHIM HAINZ	Telephone	
Title and Company			

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Signature	<i>Gabriele Weirauch</i>	Date	June 26 <sup>th</sup> 2006
Name	GABRIELE WEIRAUCH	Telephone	
Title and Company			

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